

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

09/832637

## CLAIMS AS FILED - PART I

|   | (Column 1)   | (Column 2)   |
|---|--------------|--------------|
| TOTAL CLAIMS  |              |              |
| FOR   | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | minus 20= *  | 20           |
| INDEPENDENT CLAIMS  | minus 3 = *  | 3            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |              |              |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE   |
|-----------|-------|
| BASIC FEE | \$375 |
| X\$ 9=    |       |
| X42=      |       |
| +140=     |       |
| TOTAL     |       |

| RATE      | FEE   |
|-----------|-------|
| BASIC FEE | \$750 |
| X\$18=    | 20    |
| X84=      | 3     |
| +280=     |       |
| TOTAL     |       |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

|   | (Column 1)                       | (Column 2) | (Column 3)                         | (Column 4) | (Column 5)    |
|---|----------------------------------|------------|------------------------------------|------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT |            | HIGHEST NUMBER PREVIOUSLY PAID FOR |            | PRESENT EXTRA |
| Total   | * 14                             | Minus      | ** 20                              | =          | -             |
| Independent   | * 3                              | Minus      | *** 3                              | =          | -             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |            |                                    |            |               |

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9=           |                |
| X42=             |                |
| +140=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$18=           |                |
| X84=             |                |
| +280=            |                |
| TOTAL ADDIT. FEE |                |

12-2-04

|   | (Column 1)                       | (Column 2) | (Column 3)                         | (Column 4) | (Column 5)    |
|---|----------------------------------|------------|------------------------------------|------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT |            | HIGHEST NUMBER PREVIOUSLY PAID FOR |            | PRESENT EXTRA |
| Total   | *                                | Minus      | **                                 | =          |               |
| Independent   | *                                | Minus      | ***                                | =          |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |            |                                    |            |               |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9=           |                |
| X42=             |                |
| +140=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$18=           |                |
| X84=             |                |
| +280=            |                |
| TOTAL ADDIT. FEE |                |

|   | (Column 1)                       | (Column 2) | (Column 3)                         | (Column 4) | (Column 5)    |
|---|----------------------------------|------------|------------------------------------|------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT |            | HIGHEST NUMBER PREVIOUSLY PAID FOR |            | PRESENT EXTRA |
| Total   | *                                | Minus      | **                                 | =          |               |
| Independent   | *                                | Minus      | ***                                | =          |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |            |                                    |            |               |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9=           |                |
| X42=             |                |
| +140=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$18=           |                |
| X84=             |                |
| +280=            |                |
| TOTAL ADDIT. FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.